



PTO/SB/21 (09-04)

Approved for use through 07/31/2006. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number

TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>		Application Number	10/621,552
		Filing Date	July 17, 2003
		First Named Inventor	Bobby Hu
		Art Unit	3723
		Examiner Name	D. Meislin
Total Number of Pages in This Submission	15	Attorney Docket Number	2186-00400 DVF

ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

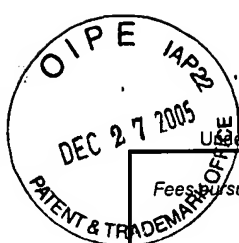
Firm	CONLEY ROSE, P. C.	
Signature		
Printed name	DEREK V. FORINASH	
Date	December 19, 2005	Reg. No. 47,231

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Mail Stop Amendment, Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.			
Typed or Printed Name	M. A. CRABTREE		
Signature		Date	December 19, 2005

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P. O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and selection option 2



Effective on 12/08/04. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).		Complete if Known	
FEE TRANSMITTAL For FY 2005		Application Number	10/621,552
		Filing Date	July 17, 2003
		First Named Inventor	Bobby Hu
		Examiner Name	D. Meislin
		Art Unit	3723
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27	Attorney Docket No.	2186-00400 DVF	
TOTAL AMOUNT OF PAYMENT (\$)			

METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): _____

☒ Deposit Account Deposit Account Number: **03-2769** Deposit Account Name: **Conley Rose, P.C.**

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee

☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 ☒ Credit any overpayments

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEES

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 (including Reissues)	50	25
Each independent claim over 3 (including Reissues)	200	100
Multiple dependent claims	360	180

Total Claims 18 - 61 or HP = 0 x = 00.00
Extra Claims Fee (\$)

HP = highest number of total claims paid for, if greater than 20

Indep. Claims 3 - 8 or HP = 0 x = 00.00
Extra Claims Fee (\$)

HP = highest number of independent claims paid for, if greater than 3

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets - 100 = **Extra Sheets** / 50 = **Number of each additional 50 or fraction thereof** (round up to a whole number) x **Fee (\$)** = **Fee Paid (\$)**

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge):

Fees Paid (\$)

SUBMITTED BY

Signature		Registration No. (Attorney/Agent)	47,231	Telephone	(713) 238-8000
Name (Print/Type)	DEREK V. FORINASH			Date	December 19, 2005



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANT: BOBBY HU

§
§
§
§
§
§
§
§
§

ART UNIT: 3723

SERIAL NO.: 10/621,552

FILED: July 17, 2003

EXAMINER:
D. Meislin

FOR: Reversible Ratcheting Tool with a
Smaller Head and Improved
Driving Torque

CONFIRMATION NO. 1339

RESPONSE TO OFFICE ACTION DATED OCTOBER 5, 2005

Atty. Dkt. No.: 2186-00400
Date: December 19, 2005

Mail Stop RCE
Commissioner For Patents
P. O. Box 1450
Alexandria, VA. 22313-1450

Sir:

In an Office Action dated October 5, 2005, the Examiner rejected claims 1-7, 15-20, and 23-26. Reconsideration is respectfully requested.

Amendments to the Claims are reflected in the listing of claims that begins on page 2 of this paper.

Remarks/Arguments begin on page 7 of this paper.